

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000071762

Entity Name: MI CASITA BAKERY, INC.

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

1674 BOULEVARD SHOPPES
SE PORT ST. LUCIE BLVD.
PORT ST. LUCIE, FL 34952 US

Current Mailing Address:

1674 BOULEVARD SHOPPES
SE PORT ST. LUCIE BLVD.
PORT ST. LUCIE, FL 34952 US

New Principal Place of Business:

1674 S.E. PORT ST. LUCIE BOULEVARD
BOULEVARD SHOPPES
PORT ST. LUCIE, FL 34952 US

New Mailing Address:

1674 S.E. PORT ST. LUCIE BOULEVARD
BOULEVARD SHOPPES
PORT ST. LUCIE, FL 34952 US

FEI Number: 20-2863384

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONROY - FLORES, LUIS W
817 S.W. ROCKY BAYOU TER
PORT ST. LUCIE, FL 34986 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MONROY - FLORES, LUIS W
Address: 817 S.W. ROCKY BAYOU TER
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: V () Delete
Name: OVIEDO, WILLIAM
Address: 1067 SW MANTILLA AVE.
City-St-Zip: PORT ST. LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS MONROY-FLORES

P

05/01/2006

Electronic Signature of Signing Officer or Director

Date